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CONFIRMATION NO. 4456

<b>SERIAL NUMBER</b> 10/533,365	<b>FILING OR 371(c) DATE</b> 11/09/2005 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 2345.2046-007
<b>APPLICANTS</b> Inga Reynisdottir, Reykjavik, ICELAND; Jeffrey R. Gulcher, Lake Barrington, IL; Struan F. Grant, Reykjavik, ICELAND; Gudmar Thorleifsson, Reykjavik, ICELAND;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/34801 10/31/2003 which claims benefit of 60/423,541 11/01/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> ICELAND	<b>SHEETS DRAWING</b> 299	<b>TOTAL CLAIMS</b> 46
<b>INDEPENDENT CLAIMS</b> 22				
<b>ADDRESS</b> 021005				
<b>TITLE</b> Human type II diabetes gene-slit-3 located on chromosome 5q35				
<b>FILING FEE RECEIVED</b> 7580	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	